



Parental Consent Form to Obtain a Learner Permit

Applicant Full Name (First, Middle, Last, Suffix)	Date of Birth	Sex	Social Security #
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
DC Address	City, State	Zip Code	Telephone #
	Washington, DC		

Relationship to Applicant (Check one)	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian*	*If Legal guardian, provide court decree number:	
Full Name of Parent or Legal Guardian (First, Middle, Last, Suffix)	Date of Birth	Sex	Telephone #
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Address	City, State	Zip Code	
	Washington, DC		
DC Driver License or Identification Card Number	Expiration Date	Email Address	

Parental/Legal Guardianship Verification	
One of the following documents is required depending on your relationship to the applicant	
Parent	Legal Guardian
<ul style="list-style-type: none">Full birth certificate of applicant or adoption court order reflecting parent's name	<ul style="list-style-type: none">Guardianship decree
<p>Any person using a fictitious name or address and knowingly making any false statement on this application is in violation of DC Law and subject to a fine of not more than \$1,000 or 180 days imprisonment or both. (D.C. Official Code §22-2405)</p> <p>I hereby certify that the information provided on this document is true and accurate to the best of my knowledge and belief.</p> <p>Signature of Parent/Legal Guardian: _____ Date: _____</p>	

For DMV Official Use Only	
DMV Examiner's Signature: _____	Date: _____